

# Preventing Leader Derailment—A Strategic Imperative for Public Health Agencies

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Public health leaders, such as those who serve as state health officials (SHOs), routinely face challenges that are uncertain and complex. Those who reflect on the challenges they face and use those reflections to improve themselves and their teams develop into more effective leaders. Not addressing challenges can lead to the risk of premature “derailment.” In this column, we review research from the Center for Creative Leadership (CCL), a global authority in leadership development, which explores the underlying dynamics of derailment. We also share insights gained from ongoing research into SHO success

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discussed in prior Management Moment columns.<sup>1,2</sup> Finally, we offer several thoughts on strategies for preventing derailment among senior public health leaders.

### **Derailment and Contributing Factors**

“Derailment” is best defined as the premature slowing of career progression, which is unintended (and often unexpected). Often the leader's strengths that have led to promotion in the past (such as strong technical skills and know-how), if overemphasized or not contextualized, may become weaknesses that can lead to derailment. Since changes in the context in which a leader works (eg, moving from private sector health care to government leadership) often require skill sets and mind-sets that are different from those which a leader used successfully in the past, these newer skill sets may be lacking or less developed. As a result, leaders who historically have been on a positive career track (ie, “rapid risers”) could be at risk for future job or career derailment.

### **How Leaders Develop**

Leaders develop in several major ways. Much is learned on the job (eg, skills, values, perspectives) through challenging assignments, significant mentoring relationships, hardships (including personal mistakes and failures), formal course work, and leadership development experiences.

A strong link exists between specific experiences and lessons learned from these experiences. Leaders must change behavior based on lessons learned, and this can only be done through deep reflection on experiences obtained; support of peers, mentors, and coaches; feedback; learning agility; and high motivation to change behavior. Leaders who do not harvest the lessons learned from their experiences risk making the same mistakes repeatedly. For example, talented professionals may have excelled in their technical role exclusively relying on themselves to make tough decisions versus tapping the expertise of their colleagues and team members. When stressed, they can easily fall back on “solo” operating styles, which in most cases will lead to either poor decisions or the lack of engagement by

team members who are ultimately responsible for executing the strategy. Thus, the essence of learning from experience is overcoming comfortable habits and personal quirks and making transitions to new ways of behaving. In the context of a state health agency, new SHOs may also learn from the experiences of others (such as a seasoned senior deputy) who have gained knowledge and wisdom from working in the agency over the long term.

### **Derailment Dynamics**

Some leaders are drawn to leadership roles because they like to take charge (ie, they do not like a subordinate role), are highly self-confident, and solve problems well. They are usually intelligent and have a range of skills, technical knowledge, and abilities. They are seen as being on the “fast track.” However, relationship building may not be a well-developed competency.

In the private sector, 30% to 50% of high potential leaders derail; the most common reason for derailment is an inability to relate to people in ways consistent with high emotional intelligence.<sup>3–5</sup> As leaders advance the career ladder, technical skills are necessary but far from sufficient. Those who rely too much on technical skills and knowledge are at great risk for derailment (eg, a skilled practicing physician who becomes a high-level government health official). At times, “fast track” leaders do not listen well, are impatient, and tend to want to do things on their own without involvement of their team. As a result, relationships suffer and derailment may occur. Based on our research with both current and former SHOs, the vast majority of unexpected job loss came not as a result of a technical failure but rather as a result of an error in leadership or management consistent with the CCL research cited later. In some instances, these private sector dynamics may apply to the challenges faced by a new SHO moving from the private sector into this new role. According to CCL research,<sup>3–5</sup> a range of behaviors may lead to derailment:

1. Difficulty selecting, building, and leading a team

a. Selecting people for the team who do not work well together

b. Not resolving conflict among subordinates

c. Being a poor delegator

2. Difficulty changing or adapting

a. Being resistant to feedback and not learning from mistakes

b. Not adapting to the culture of the organization

c. Not transiting from technical manager to general manager

d. Relying too much on a strength, talent, or raw energy

3. Failure to meet organizational objectives

a. Lacking follow-through and failing to monitor progress

b. Lacking attention to essential details

c. Failing to effectively sell a position or policy

d. Failing to understand priorities and needs of boss

4. Problems with interpersonal relationships

a. Treating others poorly

b. Failing to recognize good work

c. Failing to handle disagreements with  
boss

d. Lacking composure when under  
pressure

### **Derailment of SHOs**

It can be very helpful to better understand the dynamics that may underlay the relatively short tenure of SHOs.<sup>6</sup> As part of our ongoing study of SHOs, focus group conversations and interviews have been particularly insightful in revealing this derailment dynamic. Hearing a derailment story and applying the benefit of hindsight, we were able to identify a list of potential skills, behaviors, and activities that might have been useful in these unique situations.

1. SHOs may enter a highly charged political environment with both predictable and unpredictable challenges. As a result, in some situations, arriving on the job without a well thought-out strategy for working in a hostile political environment may lead to predictable problems including the potential for early derailment.

2. Personnel management can be challenging. State government personnel systems can be confusing and frustrating, particularly to a new SHO without government experience. Improper handling of a delicate personnel matter can be another potential “derailer.”

3. The failure to understand clearly from day 1. The expectations of the boss can lead to derailment as a result of a failure to recognize “hot button” issues early and to alert the governor's office of an emerging issue.

4. An SHO may risk derailment by a failure to align with the governor's priorities and public persona. By failing to be sensitive to visibility issues in public settings, SHOs may risk “upstaging” the governor, leading to unfortunate consequences.

5. Demonstrating respect for people in the workplace can be a powerful leadership and team-building quality. Words matter. A failure to relate to others in meaningful ways, as noted earlier, can lead to derailment.

### **Strategies for Preventing Derailment**

In light of recent research, including a Call to Action from the de Beaumont Foundation,<sup>7</sup> and our career experiences, we recommend a few strategies to prevent premature derailment among SHOs and other senior leaders:

1. Enhanced relationship with the governor and the governor's senior staff. As noted earlier, derailment may occur because of an issue with the governor or the governor's staff (or other elected officials).

Tactics that may be valuable in cultivating stronger relationships include ongoing clarification of the governor's health priorities (including “hot button issues”), clarification of communication channels (including the “no surprises rule”), cultivation of a trusted senior staff member in the governor's office as a source of insight and advice, and standardization of communication processes (eg, media contacts, press releases). It is important to know the political sensitivities well enough to make sure the governor is not upstaged.

2. Anticipating causes of derailment: Development of an “early warning system.” In addition to external causes of derailment, internal issues within the state health agency may arise and result in SHO derailment. SHOs often risk being insulated at the top of a large complex state public health department, resulting in “unpleasant surprises” such as fiscal management issues, program shortcomings, and partner relationship difficulties. Development of a “derailment early warning system” may be of benefit. Such a

system might rely on a trusted senior health agency leader (eg, senior deputy) or a small “kitchen cabinet” of trusted advisors. Such a process may be of benefit in identifying “blind spots” and in assisting the SHO in identifying and acting on problems before they escalate.

3. Development of the mind-sets and skill sets needed to succeed as an SHO. As noted earlier and in a prior Management Moment column,<sup>2</sup> SHOs may enter their position with strong technical skills but with less developed leadership and management skills. For example, emotional intelligence is as important a qualification for the position of SHO as formal technical skills and education. To function more effectively as an SHO and thereby prevent derailment, participation in a formal leadership development experience will be of great value. In particular, use of a periodic formal 360-degree assessment along with executive coaching often helps identify “blind spots” that are potential derailers. Several components of the new ASTHO Leadership Institute can offer early support for new SHOs using these established leader development techniques. Furthermore, direct communication with current or former SHOs may assist as sources of peer consultation.

4. Enhanced skills in communication. Providing the leadership needed to be successful requires the ability to communicate goals and objectives effectively to both agency staff and public health partners. The ability to effectively share information across the agency enables the strong teamwork that is critical to the success of the agency. Communicating with the news media and the legislature all require strong communication skill. Early preparation and development of risk communication skills are essential for effectively managing the unique issues of a public health crisis (eg, infectious disease or foodborne outbreak, natural or man-made disaster).

5. Building and leading a strong public health team. The team represents not only an extension of the leadership and management tasks delegated by the SHO but also fills the gaps in experience and problem solving that all successful organizations must address. Cultivating team expertise in such areas as budget, management systems, and public relations can help prevent derailment and enhance

effectiveness. Knowing early on in the job how to get help working through personnel challenges is important. Whether it is strong human resources support or other trusted advisors, the ability to recognize and address personnel issues effectively can be critical. In addition, a strong team carries on effectively when the inevitable transition of leadership happens.

## **Conclusion**

Research has shown that premature derailment is a risk for SHOs. Other leadership research has identified factors that may contribute to derailment, leading to the development of derailment prevention strategies presented here. If successful, these prevention strategies may assist in stabilizing and potentially extending the tenure and enhancing the impact of SHOs, thereby improving the performance of our nation's state health agencies.

A failure to prevent SHO derailment has serious consequences not just for an individual public health leader but also for the agency that the SHO leads and to the public health enterprise. As noted in recent research, the average tenure of SHOs has fallen in recent years to a low of approximately 3 years in the position.<sup>6</sup> This instability of top agency leadership often results in a lack of continuity of commitment to key policies and partnerships that are essential to the success of the public health enterprise.

Furthermore, this positional and organizational instability erodes public support for and confidence in public health leadership. In these times, public support for our efforts to protect and promote the health of the public is more important now than ever. Thus, derailment prevention is a strategic imperative for the success of public health agencies across the nation.



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